

## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
<b>FEE DETERMINATION</b>			
<b>O.I.P.E. CLASSIFIER</b>			
<b>FORMALITY REVIEW</b>			
<b>RESPONSE FORMALITY REVIEW</b>			

2/18

8/63

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## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral) Canceled A ..... Appeal  
 -+ ..... Restricted O ..... Objected

Claim	Date
Final	
Original	
1	7/15/02
2	7/15/02
3	7/15/02
4	7/15/02
5	7/15/02
6	7/15/02
7	7/15/02
8	7/15/02
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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